Under the F	Paperwork Reduction Act of 1995, no persons are required to re-		ation unless it displays a valid OMB control num							
	UTILITY	Attorney Docket No.	2500DV2CN2DV3CN2							
PATENT APPLICATION		First Inventor	Peter M. Bonutti							
TRANSMITTAL		Title	Fluid Operated Retractors	F of						
(Only for n	new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	ET 710030085 US	S						
See MPEP o	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO:	Commissioner for Patents Mail Stop Patent Application P.O. Box 1450 Alexandria VA 22313-1450	03917						
(Submit Applica See 37 Applica See 37 Specification (preferm - Descriptor - Cross - Stater - Refere or a constant - Backgrammer - Backgrammer - Backgrammer - Detailling - Claimi	ed arrangement set forth below) iptive title of the invention Reference to Related Applications nent Regarding Fed sponsored R & D ence to sequence listing, a table, omputer program listing appendix ground of the Invention Summary of the Invention Description of the Drawings (if filed) ed Description	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Reader Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS								
4. Drawin 5. Oath or Decl a. Nev b. Cop (for	ng(s) (35 U.S.C. 113) [Total Sheets 11]	9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1499 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:								
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: 10/662,923										
Prior application information: Examiner Unknown Art Unit: Unknown For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS										
	13. CORRESPOND	JENGE ADDRESS								
Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) OR Correspondence address below										
Name	Kimberly V. Perry, Esq.									
Address	U.S. Surgical, A Division of Tyco Heal	thcare Group, LP								
City	150 Glover Avenue Norwalk	State Connecticut	Zip Code 06856							
Country		elephone 203-845-45		66						
Name (Print/Ty)		Registration No. (Attorne)								
Signature Date 12/4/63										
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CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number ET 710030085 US addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box (1450, Alexandrier, VA 22813-1450.

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CEE TO A RICHITTA					Co	mplete if Known			
FEE TRANSMITTA		Application Number		er	To Be Assigned				
for FY 2003		Filing Date			Concurrently Herewith				
		First Named Inventor		ntor	Peter M. Bonutti				
Patent fees are subject to annual revision.		Examiner Name				Unassigned			
Applicant claims small entity status. See 37 CFR 1.27		Art Unit				Unassigned			
TOTAL AMOUNT OF PAYMENT (\$) 2,460.00	·	Attorney Docket No. 2500 DIV II CON II DIV III CON III							
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)							
Check Credit card Money Other None	3. ADDITIONAL FEES								
Deposit Account:	Large Entity Small Entity								
Denosit		Fee e (\$)	Fee Code	Fee (\$)		Fee Description Fee Pa	id		
Account Number	105	130	2051	65	Surch	narge - late filing fee or oath			
Deposit Account United States Surgical	1052	2 50	2052	25		arge - late provisional filing fee or sheet			
Name	1053	130	1053	130		English specification	_		
The Commissioner is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For fil	ing a request for ex parte reexamination			
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*		esting publication of SIR prior to			
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805	1,840*	Requ	esting publication of SIR after	╗		
to the above-identified deposit account.	1254	410	2251	55		niner action	$\exists I$		
FEE CALCULATION	1251 1252			200		nsion for reply within first month	- 11		
1. BASIC FILING FEE	1252			460		nsion for reply within third month	ПI		
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid		1,440	2254			nsion for reply within fourth month	ᅦ		
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1001 740 2001 370 Utility filing fee 750.00	1401		1	160		e of Appeal	\exists		
1002 330 2002 165 Design filing fee	1402		2402			a brief in support of an appeal	71		
1004 740 2004 370 Reissue filing fee	1403		2403		_	est for oral hearing	71		
1005 160 2005 80 Provisional filing fee		1,510	l	1,510		on to institute a public use proceeding	71		
	4	110	2452			on to revive - unavoidable	\Box		
SUBTOTAL (1) (\$)750.00	1453	1,280	2453	640	Petiti	on to revive - unintentional	\Box		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,280	2501	640	Utility	issue fee (or reissue)			
Ext <u>ra Claims below Fee Paid</u>	1502	460	2502	230	Desig	gn issue fee			
Total Claims 101 -20** = 81 X 18.00 = 1458 Independent 6 20**	1503	620	2503	310	Plant	t issue fee	\Box I		
Claims 0 - 3" = 5 X 04.00 = 232	1460	130	1460	130	Petiti	ons to the Commissioner			
Multiple Dependent	1807	50	1807	50	Proc	essing fee under 37 CFR 1.17(q)	ШI		
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806	180	Subm	nission of Information Disclosure Stmt	_		
Code (\$) Code (\$)	8021	40	8021	40		rding each patent assignment per erty (times number of properties)			
1202 18 2202 9 Claims in excess of 20	1809	740	2809	370	Filing	a submission after final rejection			
1201 84 2201 42 Independent claims in excess of 3 1203 280 2203 140 Multiple dependent claim, if not paid	1010	740	2810	370	•	FR 1.129(a)) ach additional invention to be	ᅰ		
1204 84 2204 42 ** Reissue independent claims	İ				exam	nined (37 CFR 1.129(b))			
over original patent	180		2801			est for Continued Examination (RCE)	_		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802		1802	900		est for expedited examination design application	_		
SUBTOTAL (2) (\$) 1,710.00		Other fee (specify) *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$\0.00							
**or number previously paid, if greater; For Reissues, see above	Rec	luced by	Basic	riling F	ee Pai	d SUBTOTAL (3) (\$)0.00			

(Complete (if applicable) SUBMITTED BY Registration No. Name (Print/Type) 43,612 Telephone 203-845-4562 Kimberly V. Perry Signature 12/5/03

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Docket: 2500 DIV 2 CON 2 DIV 3 CON 3

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Peter M. Bonutti

Examiner:

To Be Assigned

Group Art Unit: To Be Assigned

Serial No:

To Be Assigned

Filed: Concurrently Herewith

For:

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